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APR 24 2013

EPIQ BANKRUPTCY SOLUTIONS, LLC

United States Bankruptcy Court for the Southern District of New York

WITHDRAWAL OF CLAIM

Debtor Name and Case Number:	Lehman Brothers Holdings Inc.
Creditor Name and Address:	Aberdeen Global II -Sterling Long Dated Credit Bond Fund (formerly Aberdeen Global II - Long Dated Sterling Credit Fund), 2b, rue Albert Borschette, L-1246, Luxembourg, Grand Duchy of Luxembourg
Court Claim Number (if known):	16651
Date Claim Filed:	18 September 2009
Total Amount of Claim Filed:	\$3,941,840.58

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Clerk of this Court, or their duly appointed Claims Agent, to reflect this withdrawal on the official claims register for the above-referenced Debtor.

Dated: 15/2/2013


 Print Name: CHARLIE MACRAE
 Title (if applicable): DIRECTOR

DEFINITIONS

Debtor

The person, corporation, or other entity that has filed a bankruptcy case is called the debtor.

Creditor

A creditor is any person, corporation, or other entity to which the debtor owed a debt.

Proof of Claim

A form filed with the clerk of the bankruptcy court where the bankruptcy case was filed, to tell the bankruptcy court how much the debtor owed a creditor (the amount of the creditor's claim).

ITEMS TO BE COMPLETED ON THIS WITHDRAWAL OF CLAIM

Court, Name of Debtor and Case Number:

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the name of the debtor in the bankruptcy case, and the bankruptcy case number. If you received a notice of the case from the court, all of this information is near the top of the notice.

Information about Creditor:

Complete the section giving the name and address of the creditor that was listed on the previously filed Proof of Claim form.

Information identifying the Claim that is to be withdrawn:

Complete the section giving the court claim number, date claim was filed and total amount of claim filed to help identify the claim that is to be withdrawn.

Sign and print the name and title, if any, of the creditor or other person authorized to file this withdrawal of claim (attach copy of power of attorney, if any).

This form must be filed with the clerk of the bankruptcy court where the bankruptcy case was filed or, if applicable, with their duly appointed Claims Agent as per any procedure approved by the court in the above-referenced bankruptcy proceeding.



Epiq Bankruptcy Solutions, LLC
c/o: Lehman Brothers Holdings Claims Processing
Attn: Gregory Winter
757 Third Avenue, 3rd Floor
New York, NY 10017



23 April 2013

Dear Greg,

Lehman Brothers Chapter 11 – Claims Withdrawal

Further to our email correspondence dated 15 February 2013, we would be grateful if you could file the attached claim withdrawals in respect of claim numbers 16649, 16651, 16653, 16654 and 16648.

Please do let me know if you require anything further.

Yours faithfully

A handwritten signature in black ink, appearing to read "Brett Bunting". It is written over a dotted line.

BRETT BUNTING
Head of Legal – Client Take-on and Events

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**4
HOURS
SHIPPING**



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Consignee

EPIQ BANKRUPTCY SOLUTIONS LLC
C/O LEHMAN BROTHERS HOLDINGS C
575 THIRD AVENUE 3RD FLOOR
NEW YORK 10017
NY USA

Contact

GREGORY WINTER

Telephone

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APR 24 2013

EPIQ SYSTEMS

Consignment Note

1868468



1 of 1 MARK 3 USA

AmWorld

24 HOURS A DAY

TEL: UK +44 (0) 1753 685509

SHIPPER TO COMPLETE ALL GREY SHADED AREAS

SHIPPER'S ACCOUNT # ¹		SHIPPER'S REFERENCE	ORIGIN	AIRBILL NUMBER	DESTINATION	TRACKING NUMBER						
ABR		BL LEHMAN	UK		USA	1868468						
FROM SHIPPER:		TO (CONSIGNEE):				OFFICE ADDRESS HANDLING BASE WEIGHT EXCESS WEIGHT CUSTOMS ENTRY COLLECTION DELIVERY PACKING FUEL CHG OTHER TOTAL						
ABERDEEN ASSET MANAGEMENT PLC 100 BULLS HOUSE 1 BREAD STREET LONDON EC4M 0NH UK		EPIQ BANKRUPTCY SOLUTIONS LLC C/O LEHMAN BROTHERS HOLDINGS C 575 THIRD AVENUE 3RD FLOOR NEW YORK 10017 NY USA										
SENT BY (NAME/DEPT) Facilities London		ATTN OF (NAME/DEPT) GREGORY WINTER										
TEL/MOB 0207 463 6508		TEL/MOB										
N° OF PIECES		FULL DESCRIPTION OF CONTENTS					WEIGHT	DECLARED VALUE				
		DIMS	X	X	CM / INS		DIMS	X	X	CM / INS	INSURANCE YES / NO	
		SPECIAL INSTRUCTIONS								INSURANCE VALUE		
SHIPPER'S SIGNATURE										R & CONDITION	TIME	
RECEIVED BY AmWorld											DATE	
* NY 270169 *												

ORIGIN - L: ACCOUNTS - Y: FILE - B: P.O.D - W: CONSIGNEE - WH: EXTRA COPY - WHL: C